

11-24-03

AF/1642/6

PTO/SB/17 (10-03)

Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003, Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,280.00)

Complete if Known	
Application Number	09/767370-Conf. #2716
Filing Date	January 23, 2001
First Named Inventor	Jeffrey L. Browning
Examiner Name	C. Yaen
Art Unit	1642
Attorney Docket No.	BGNA054

RECEIVED

JAN 05 2004

METHOD OF PAYMENT (check all that apply)				
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input type="checkbox"/> None
<input checked="" type="checkbox"/> Deposit Account:				
Deposit Account Number 12-0080				
Deposit Account Name Lahive & Cockfield, LLP				
The Director is authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input checked="" type="checkbox"/> Credit any overpayments			
<input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)				
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				
FEE CALCULATION				
1. BASIC FILING FEE				
Large Entity	Small Entity	Fee Description	Fee Paid	
Fee Code (\$)	Fee Code (\$)			
1001 770	2001 385	Utility filing fee		
1002 340	2002 170	Design filing fee		
1003 530	2003 265	Plant filing fee		
1004 770	2004 385	Reissue filing fee		
1005 160	2005 80	Provisional filing fee		
SUBTOTAL (1) (\$)			0.00	

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE				
Large Entity	Small Entity	Extra Claims	Fee from below	Fee Paid
Total Claims		-**	=	
Independent Claims		-**	=	
Multiple Dependent			=	
Fee Description				
Fee Code (\$)	Fee Code (\$)			
1202 18	2202 9	Claims in excess of 20		
1201 86	2201 43	Independent claims in excess of 3		
1203 290	2203 145	Multiple dependent claim, if not paid		
1204 86	2204 43	** Reissue independent claims over original patent		
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent		
SUBTOTAL (2) (\$)			0.00	

** or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES		FEE CALCULATION (continued)		JAN 05 2004
Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description
		Fee Code (\$)	Fee Code (\$)	
1051 130	2051 65	1051 130	2051 65	Surcharge - late filing fee or oath
1052 50	2052 25	1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet
1053 130	1053 130	1053 130	1053 130	Non-English specification
1812 2,520	1812 2,520	1812 2,520	1812 2,520	For filing a request for ex parte reexamination
1804 920*	1804 920*	1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action
1805 1,840*	1805 1,840*	1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action
1251 110	2251 55	1251 110	2251 55	Extension for reply within first month
1252 420	2252 210	1252 420	2252 210	Extension for reply within second month
1253 950	2253 475	1253 950	2253 475	Extension for reply within third month
1254 1,480	2254 740	1254 1,480	2254 740	Extension for reply within fourth month
1255 2,010	2255 1,005	1255 2,010	2255 1,005	Extension for reply within fifth month
1401 330	2401 165	1401 330	2401 165	Notice of Appeal
1402 330	2402 165	1402 330	2402 165	Filing a brief in support of an appeal
1403 290	2403 145	1403 290	2403 145	Request for oral hearing
1451 1,510	1451 1,510	1451 1,510	1451 1,510	Petition to institute a public use proceeding
1452 110	2452 55	1452 110	2452 55	Petition to revive - unavoidable
1453 1,330	2453 665	1453 1,330	2453 665	Petition to revive - unintentional
1501 1,330	2501 665	1501 1,330	2501 665	Utility issue fee (or reissue)
1502 480	2502 240	1502 480	2502 240	Design issue fee
1503 640	2503 320	1503 640	2503 320	Plant issue fee
1460 130	1460 130	1460 130	1460 130	Petitions to the Commissioner
1807 50	1807 50	1807 50	1807 50	Processing fee under 37 CFR 1.17(q)
1806 180	1806 180	1806 180	1806 180	Submission of Information Disclosure Stmt
8021 40	8021 40	8021 40	8021 40	Recording each patent assignment per property (times number of properties)
1809 770	2809 385	1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))
1810 770	2810 385	1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))
1801 770	2801 385	1801 770	2801 385	Request for Continued Examination (RCE)
1802 900	1802 900	1802 900	1802 900	Request for expedited examination of a design application
Other fee (specify)				
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$ 1,280.00)

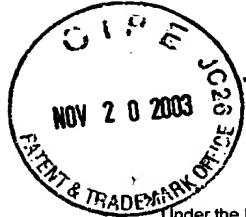
SUBMITTED BY				
Name (Print/Type)	Amy E. Mandragouras		Registration No. (Attorney/Agent)	36,207
Signature			Date	November 20, 2003

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Dated: November 20, 2003

Signature:

(Amy E. Mandragouras)



NOV 20 2003

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PTO/SB/21 (08-03)

TRANSMITTAL FORM

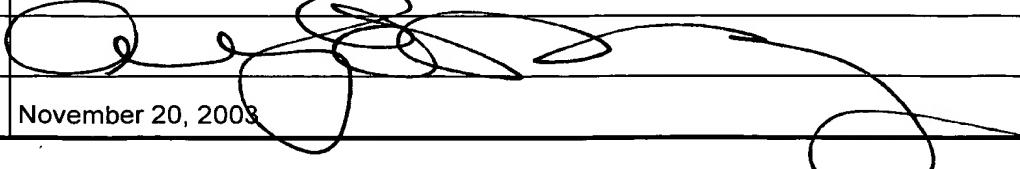
(to be used for all correspondence after initial filing)

		Application Number	09/767370-Conf. #2716
		Filing Date	January 23, 2001
		First Named Inventor	Jeffrey L. Browning
		Art Unit	1642
		Examiner Name	C. Yaen
Total Number of Pages in This Submission	5	Attorney Docket Number	BGNA054

ENCLOSURES (Check all that apply)

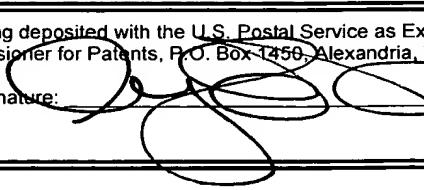
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): A Pre-paid, acknowledgement postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	LAHIVE & COCKFIELD, LLP Amy E. Mandragouras - 36207
Signature	
Date	November 20, 2003

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